

Approv U.S. Patent and Tradem

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PTO/SB/17 (10-07) ved for use through 06/30/2010. OMB 0651-0032 ark Office; U.S. DEPARTMENT OF COMMERCE on unless it displays a valid OMB control number.	IFW

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				10.00	Complete if Known						
				18).	Application Num			0/720,443-Conf. #4538			
					Filing Date		November 25, 2003				
					First Named Inv	entor	Hubertus M. J	lubertus M. J. M. BOESTEN			
For FY 2008					Examiner Name						
Applicant claims small entity status. See 37 CFR 1.27					Art Unit 2625						
TOTAL AMOUNT OF PAYMENT (\$) 1,320.00					Attorney Docket No. 0142-0439P						
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
	F	LING FE		SEA	RCH FEES	EXAMI	NATION FEES				
Application Type	Fee (S		<u>l Entity</u> e (\$)	e (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)		
Utility	310			510	255	210	105	<u>-</u>			
Design	210		05	100	-50	130	65				
Plant	210			310	. 155	160	80				
Reissue	310			510	255	620	310				
Provisional	210		05	0	0	0	0				
2. EXCESS CLAIM		•	00	ŭ	•	-	-		mall Entity		
Fee (\$) Fee (\$)											
Each claim over 20 (including Reissues) 50 25											
Cuoi independent viana o voi o (microanie)									105		
Multiple dependen	t claims							370	185		
Total Claims	Extra Claims	Fee (\$			aid (\$)	7	Multiple Dependent Claims				
2120		x 50.00		50.	00	Fee Paid (\$)					
HP = highest number		r, if greater t Fee (\$	_	P:	aid (\$)				-		
Indep. Claims 2 - 3	Extra Claims	x ree (\$	ـــــــــــــــــــــــــــــــــــــ	0010	aid (#)						
HP = highest number		s paid for, if	greater than 3.								
3. APPLICATION	SIZE FEE										
If the specification	n and drawings e	xceed 100	sheets of pa	aper (e	excluding electro	onically f	filed sequence or	computer			
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
						. 41 41		Eag F	aid (\$)		
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S)	100 =	/50 =		'	(louid up to a wild	ne mamber	· ^	Fees	Paid (\$)		
· , ,	ecification \$13	O fee (no	small entity	disco	unt)						
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00											
1252 Extension for response within second month 460.00											
SUBMITTED BY											
Signature	gnature Registration No. 43,368 Telephone (703) 205							5-8000			
Name (Print/Type)	aul C. Lewis			Date May 28, 2008							